THE CASE OF A HYDROPHOBIA.

By Dr. FOTHERGILL.

Reprinted from the Fifth Volume of

Medical Observations and Inquiries.

BY A

A Society of Phyſicians in *London.*

With ADDITIONS.

LONDON:
Printed for T. CADELL, in the *Strand.*
M.DCC.LXXVIII.

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PREFACE.

I Have been ſolicited to reprint the following Caſe, that it might paſs into many hands where the work in which it was firſt inſerted may never come. I yielded to this ſolicitation the more eaſily when I found that neither the Society to which it was preſented, nor the Bookſeller whoſe property it is, had any objection to its being publiſhed in this manner.

The reader muſt not expect to find in it a cure for the Canine Madneſs. He will find, perhaps, nothing more of certainty in this reſpect than that *all* the remedies hitherto propoſed, either as preventatives, or cures, are found by experience to be altogether ineffectual.

To

To rely on any popular means of preventing the fatal effects of this poiſon, whether known and generally divulged, or preſerved as ſecrets, which, as the Tonquin medicine, are found to be incompetent and ineffectual, is a dangerous deception.

Were it only to give one incontrovertible fact in evidence againſt ſuch pretenſions, and of courſe to ſtimulate the faculty to make a farther ſearch after more effectual relief in this diſtemper it would be doing ſome ſervice to ſociety.

Dr. *Vaughan* of *Leiceſter* has lately publiſhed ſome caſes of the Hydrophobia which in divers reſpects confirm the intimations given in the cure referred to. And the very rational, though unſucceſsful, efforts he made to aſſiſt his patients under this calamity, are proofs of his attention, and of the hitherto untameable nature of this ſingular poiſon.

Let

Let not, however, these difficulties discourage us from observing every case that occurs with attention, and faithfully noting every incident that arises in the progress of the disease, perhaps, the united labours of the faculty, Providence permitting, may, at length, discover some effectual remedy.

To this Case are subjoined some Remarks on the Canine Madness and Hydrophobia, with a view to assist those who are called in upon these occasions, to perform their duty with satisfaction to themselves, and advantage to their patients.

J. FOTHERGILL.

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THE CASE OF A HYDROPHOBIA.

From the *Medical Observations and Inquiries.**

I Shall introduce what I have to say upon this case by an account of what happened before I saw the patient, as it was drawn up by W. French, his apothecary.

"MR. CHARLES BELLAMY of Holborn, aged forty years, on the 14th of February 1774, was bit by a cat, which was killed the same morning. The day after, *viz.* February 15th, he took the celebrated Ormskirk medicine, sold by Hill and Berry, in Hill-

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* Vol. 5. p. 195.

" Hill-Street, Berkley-Square, and con-
" formed to the directions given by the
" vender in every reſpect.

" A ſervant maid, who was bit in the
" leg by the ſame cat, juſt before her
" maſter was bitten, took the ſame re-
" medy.

" About the middle of April he com-
" plained of a pain in his right knee,
" which he ſuppoſed was affected with
" the rheumatiſm; he had felt the like
" pain at times during the laſt two years,
" and had procured himſelf eaſe by
" pumping cold water on the part. On
" the 7th of June, this complaint in-
" creaſing, he deſired me to attempt
" ſomething for his relief. I according-
" ly ſent him a box of pills, two of
" which were to be taken every night,
" containing about one grain of calo-
" mel, of camph. ipecac. and pill.
" ſapon. two grains each, and two tea-
" ſpoonfuls of Huxham's Tincture of the
" bark in buck-bean tea twice a-day.

" After having taken theſe medicines
" about ſix days, he diſcovered an unu-

ſual

" ſual titilation in the *urethra*, a con-
" traction of the *ſcrotum* and *penis* to a
" degree of pain, and an emiſſion of *ſe-*
" *men* after making water, to which he
" had frequent calls.

" Alarmed at theſe ſymptoms, which
" he attributed to his medicines, he
" was deſired to diſcontinue them, and
" to live as temperately in every reſpect
" as poſſible.

" On Thurſday the 16th of June,
" he ſent for me in the morning, com-
" plained much of having had a reſtleſs
" night, and told me, though he had
" eat ſome bread and butter as uſual for
" his breakfaſt, yet he found he could
" not ſwallow his tea without difficulty;
" he attempted it before me, and threw
" a little into his mouth, but with the
" utmoſt agitation.

" Recollecting the accident of the
" bite, and apprehending the moſt ſeri-
" ous conſequences, but without diſco-
" vering my apprehenſions to the pati-
" ent, I propoſed a phyſician might be
" ſent for. Dr. Fothergill was menti-

" oned by the patient. I met the Doc-
" tor in a few minutes after, and inform-
" ed him of the preceding circumſtan-
" ces, and attended him to the place.
Theobald's Road, W. FRENCH."
June 20, 1774.

I ſaw the patient above-mentioned the 16th in the morning: he was ſitting in his dining-room, without any other appearance of indiſpoſition than a little paleneſs; his countenance cheerful; nothing that diſcovered uneaſineſs or anxiety. He recited very diſtinctly the complaints which he called rheumatic, and which had induced him to apply for help; mentioned his opinion, that his diſorder had been increaſed by the pills, *&c.* but upon being informed, they could have no ſuch effects, he readily gave up the point. I have had, ſays he, a very reſtleſs night, my head has been much out of order, I have ſweated a great deal, was very faint with it, and have had little or no ſleep; I was extremely thirſty in the night, and intended to have regaled myſelf this morning

morning with a large draught of balm-tea, which ſtands there ready-made; but you ſhall ſee the difficulty I am under, and which induces me to aſk your aſſiſtance. He then took up a tea-cupful of common green-tea with milk in it, as he drank it commonly for breakfaſt, and brought it within a few inches of his lips with great compoſure; he then threw the liquor into his mouth, and ſwallowed it with uncommon haſte and perturbation. You ſee, ſays he, I can force it down; ſhall I do this very frequently, or will you allow me to omit it a while?

It may be proper in this place to mention, that our patient was a perſon of a good underſtanding, active, diligent, and ſenſible, much eſteemed for his probity; and during his illneſs, he gave proofs of a capacity and reſolution ſuperior to moſt men in the middle ſtations of life.

I deſired him to forbear the attempt, while it continued to affect him with extreme uneaſineſs, but to endeavour to get down bread moiſtened with any liquor he choſe as often as poſſible. The

thought

thought pleaſed him, and he got down bits of bread moiſtened with wine without much difficulty, whilſt I ſtaid, and continued ſo to do frequently during the day; and this was the only kind of nouriſhment he got down.

He had naturally a lively, penetrating eye; but his aſpect varied frequently and remarkably during our converſation. His pulſe was generally about ninety, and rather hard, but changed almoſt every minute, both in frequency and hardneſs. His fleſh felt moderate, his tongue dry; he made very little urine, and complained much of the contraction of the *ſcrotum*; the emiſſions had almoſt ceaſed, and his bowels had been ſufficiently emptied the preceding morning.

He took not the leaſt notice of his having been bit to me, nor did he appear to have recollected it during the courſe of his illneſs.

We forbore, on this account, to inquire after the ſtate of the wounded part, or to ſay any thing that might lead him

to

to ſuſpect his preſent complaints aroſe from that fatal accident.

To gain a little time for reflection on a caſe ſo ſudden and ſo dangerous, and that nothing which ſeemed reaſonable to be done might in the mean time be omitted, I ordered ſix ounces of blood to be taken from the arm, that a ſcruple of native cinnabar, and half a ſcruple of muſk made into a bolus, might be given every four hours, and that as much nouriſhment, fruit, or any thing he choſe, might be got down, as poſſible.

The family were appriſed of the dangerous ſituation he was in, and a conſultation requeſted as early in the evening as might be convenient. Dr. Watſon was pitched upon; we met at five in the evening, the 16th, and received the following account:

He had taken two of the boluſes, had got down ſeveral bits of bread moiſtened with wine, ſome ſtrawberries, a few bits of pudding, but had not attempted to drink any liquor. We requeſted he would then, for our ſatisfaction, endea-

vour

your to ſwallow a little liquor; he readily aſſented; it was brought to him; he threw it haſtily into his mouth, and ſwallowed it with difficulty and extreme perturbation. The moment the liquor touch'd the *gula*, all the muſcles concern'd in deglutition appearing to be convulſed.

He repeated to Dr. Watſon very intelligibly and fully the account which he had given me in the morning. His countenance was pale, and he ſeemed much agitated and diſtreſſed, complained of extreme thirſt, and of the impoſſibility of ſwallowing any liquid. His tongue was white, but did not appear dry. He was perpetually endeavouring with great efforts to bring up and diſcharge the viſcid, tenacious phlegm which lined the *fauces*.

The heat of his fleſh was moderate; but his pulſe was quick, hard, and irregular; ſtrong palpitations of the heart, which he made us feel by preſſing our hands to the part.

He was perfectly ſenſible; and when his endeavours to diſcharge the viſcid phlegm

phlegm would allow him to ſpeak, gave us pertinent anſwers. He had made but little urine ſince the morning, the dragging, as he called it, of the *ſcrotum* ſtill continued, and the uneaſy ſenſation and emiſſion.

The blood which was taken away in the morning had ſome ſlight appearance of inflammation, the craſſamentum firm, with ſlight traces of ſize but the ſerum remakably yellow. No evacuation by ſtool to-day. Upon the whole it was evident, that the diſorder had increaſed ſince morning.

Upon maturely conſidering this very hazardous ſtate of things, we agreed upon the following proceſs:

To procure a ſtool or two by means of a clyſter.

That he ſhould then be carried to the warm bath, and remain in it ſo long, and to ſuch a degree of heat as was moſt agreeable to himſelf.

That at his return a clyſter ſhould be given of a pint of milk and water, and

this to be repeated as often as it could be conveniently administered.

That in the laſt of theſe clyſters a drachm of Dover's powder ſhould be exhibited.

That two drachms of ſtrong mercurial unction ſhould be rubbed by himſelf on his legs and thighs as ſoon as he returned from the bath, and that he ſhould endeavour to get down all the ſuſtenance he could.

We ſaw him early next morning, the 17th, when we received the following account:

The laxative clyſter had produced a proper effect.

The warm bath relieved him greatly whilſt he was in it, ſo that for a time, as he expreſſed it, his ſufferings were ſuſpended. They returned, and with more violence, during the night. The clyſters had been repeated ſeveral times, and the unction applied.

We found he had paſſed a moſt reſtleſs night, totally without ſleep, and in much

much agitation, not being able to lie ſtill a moment.

His countenance beſpoke much diſtreſs, though accompanied with endeavours to conceal it; ſometimes he was calm, then agitated, talked much, but ſenſibly. He had now a copious flow of ſaliva leſs viſcid, his tongue white and moiſt, but foul. His pulſe was very quick, ſmall, hard, and irregular, his hands rather cold than hot. He had made water in the night with leſs difficulty, and without its uſual conſequences; the dragging pain, or ſpaſmodic affection of the cremaſter was gone off. In general, his ſtrength and faculties ſeemed leſs impaired than might have been expected, where ſo little ſuſtenance had been taken in, conſtant reſtleſſneſs, and no ſleep.

On conſidering theſe circumſtances, and obſerving there was a more copious flow of ſaliva, the tongue more moiſt, the thirſt leſs, the ſpaſm of the cremaſter gone, yet that his difficulty in ſwallow-

ing was not leſs, ſtill no ſleep, but his head ſtill clear.

That his pulſe continued hard and quick, that there was ſome appearances of an inflammatory denſity yeſterday, that he had found relief from the bath, at leaſt, a temporary ſuſpenſion. We agreed,

That he ſhould be blooded ſtanding, according as his ſtrength would bear.

That he ſhould be conveyed to the warm bath, and remain in it as long as he found it agreeable to himſelf.

A clyſter of milk and water to be thrown up at his return from the bath, with a drachm of Dover's powder, and

Half an ounce of mercurial unction to be rubbed on his legs and thighs as ſoon after as might be done conveniently.

One ſcruple of *thebaic. extr.* was ordered to be made into twenty pills, three of theſe to be given when he came out of the bath, and two every hour, till he ſeemed diſpoſed to ſleep.

At five in the evening we viſited him again, when he received us with the utmoſt tranſport and joy; and deſcribing in very ſtrong terms the pleaſure and the benefit he received from the warm bath, and the hopes he now conceived of a ſpeedy recovery.

A vaſt quantity of viſcid phlegm was continually flowing into his mouth, which he was as conſtantly employed in diſcharging; for it ſeemed to have the ſame effect upon the organs of deglutition, as if he attempted to ſwallow any other liquor, and gave him extreme uneaſineſs. To get rid of this defluction, the moment he felt it in the *fauces*, he exerted a ſudden and vehement expiration, as if it was with a deſign to blow away the moiſture ſo offenſive to him with the utmoſt force and expedition. This occaſioned a ſound, which did not ſeem very remote from the hollow barking of a dog.

When he was not employed in theſe efforts, he was talking conſtantly but coherently. His eyes had a particular

keenneſs,

keenneſs, and all his motions were quick, and vehement. His pulſe was alſo quick, hard, ſometimes trembling and irregular. His hands were rather cold and clammy, but the general heat of his body not intemperate.

He told us he had taken a great deal of nouriſhment during the day. On inquiry, we found it amounted to no more than on the preceeding; a few bits of bread moiſtened with wine, a little pudding, two or three pieces of china orange, which pleaſed him much. He had taken none of the pills.

Previous to his going into the bath, he deſired to be ſhaved; it was readily aſſented to, but proved a more troubleſome operation than he was aware of. The moment the lather touched his face, he fell back with ſurpriſe; but the part being once wetted, he bore the repetition eaſily; every freſh part that was lathered gave him conſiderable emotion; the application of the razor had in a degree a ſimilar effect; in ſhort, every new movement about him gave him ſome freſh

freſh alarm, ſome degree of agitation and anxiety. He took notice of this himſelf; but, ſays he, I am naturally haſty and choleric; and when I am got better of theſe complaints, I hope you will aſſiſt me in correcting it.

Whilſt he was in the bath, the perſon who attended him, without any particular intention, took up ſome of the warm water in his hand, and poured it on the patient's head and face: this confuſed him much; he deſcribed to us the diſtreſs it gave him at the time very emphatically; and added, with much apparent ſatisfaction, that he had ſo far conquered his averſion to it, that he had poured water on himſelf with his own hand in the ſame manner.

It was in ſpeaking of this affair, he mentioned the term *Hydrophobia*; obſerving, that his complaints reſembled it; yet without giving us any reaſon to apprehend he had the leaſt idea of his actually labouring under this fatal diſtemper.

He

He had not ſlept a moment from the time he was ſeized with the dread of liquids. He repeatedly expreſſed the ſatisfaction he received from the bath, and wiſhed to go into it again. We conſented, and deſired that he might be carried thither again, and to ſtay in it as long as he choſe it.

Every new operation now became an extreme difficulty to him; dreſſing, undreſſing at the bath, going into the water, which he now did with much intreaty, putting one foot in, and haſtily withdrawing it. He was at length prevailed on to go into it. A recollection of the eaſe he had enjoyed in it before, aided by a manly reſolution that never forſook him, ſubdued his fears, and he remained in it near half an hour. He was brought home about nine o'clock. He refuſed to take the pills, and every other medicine. He grew fretful and reſtleſs, ſoon became delirious, but offered no violence.

After remaining in this condition about two hours, the powers of nature ſunk,

he

he reclined his head gently on the pillow, and expired at half paſt twelve.

Endeavours were uſed to obſerve the condition of the part that was bit, when he was dreſſing after bathing, as far as could be done without alarming him; but ineffectually. After death it was examined with attention, but without perceiving the leaſt morbid appearance.

For this account of his laſt hours, and his behaviour at the bath, I am obliged to my friend, William French, his apothecary, who attended him with the utmoſt conſtancy and humanity.

During our attendance, we learned that this accident happened in the following manner:

The ſervant maid having occaſion to waſh, roſe earlier than was uſual; upon her entering the waſh-houſe, a cat attacked her, and fixed upon her leg. Her ſcreams brought her maſter to her aſſiſtance; he aimed a blow at the cat, but miſſed it; the cat then ſeized his leg, but he ſoon diſengaged himſelf from her; a chairman paſſing by was called in, who ſoon killed her.

Both the maſter and maid took the Ormſkirk medicine as ſpeedily as poſſible, and obſerved the directions given with it. The maſter's leg ſoon healed, and he ſeems to have thought no more of it. Perhaps fortunately for the girl, her leg did not heal; it grew worſe, and baffled the ſkill of a young ſurgeon to whom ſhe applied. We were told ſhe afterwards got into one of the city hoſpitals, on this account, and we have no doubt but ſhe is ſtill living. Our endeavours to find her out, and to know in what ſituation ſhe is, have not yet been ſucceſsful*.

It is here worth obſerving, that two perſons are bit by a mad cat, at the ſame time; the firſt who was bit, and the moſt ſeverely, eſcapes; the ſecond loſes his life. The wounds of one healed preſently, the other become a ſore, notwithſtanding endeavours to the contrary. Both uſed the ſame preventive means.

May not then the happy eſcape of the girl be owing to the ſore which followed from

* I have ſince learned that her leg continued long in a ſore ſtate, but that ſhe is now perfectly well, *Aug.* 29, 1774.

from the bite? It ſeems probable; and affords a very forcible argument for enlarging the wounds made by the bite of mad animals, and promoting a diſcharge from them as long as poſſible. Perhaps this is the only ſure preſervative againſt the direful effects of this malignant venom we are yet acquainted with.

It is with ſome repugnance we point out the inefficacy of a medicine, which in this country has eſtabliſhed a reputation of its being an infallible preſervative. Perhaps it has had its uſe in being ſo eſteemed by the generality; for it is undoubtedly true, that many perſons have ſuffered almoſt as much as they could have done from the moſt poiſonous bite, by repreſenting to themſelves the miſeries they were expoſed to. A medicine that could powerfully aſſuage theſe apprehenſions, from a general opinion of its ſalutary effects, has certainly been beneficial to many; and ſo have a multitude of other famed prophylacticks.

But as this medicine, which has ſurvived the reputation of many others, has

in this inſtance been found to be ineffectual; it ſeems to be abſolutely neceſſary to apprize the public of the fact, which, as far as one evidence can extend to, is deciſive. The ſame medicine, procured by an unexceptionable hand, (the apothecary, who urged its being given, from a thorough perſuaſion of its affording perfect ſecurity) from the place authoriſed to ſell it, and given preciſely according to the preſcriber's directions, to two perſons, bit by the ſame animal, and at the ſame time: the perſon firſt bitten eſcapes; the ſecond dies of the Hydrophobia.

Was it not of the laſt conſequence to thoſe who may become the unhappy objects of ſuch applications, to be informed that even this medicine had failed of ſucceſs, we ſhould not endeavour to bereave them of the comfort which the unfortunate might derive from an opinion that it was infallible; but when there is ſuch evidence to the contrary, it becomes neceſſary, for the public benefit, to endeavour to remove prejudices that

may

may be fatal to the real ſafety of individuals.

To enquire farther into the merits of this, or any other preſervative againſt the poiſonous bite of mad animals, would take up too much room in your collection. This, however, would be no unprofitable employment for a perſon of ſuitable leiſure and abilities; and we are not leſs in doubt about the efficacy of all thoſe remedies which have been urged by the ſeveral propoſers, as extremely beneficial in the cure of this diſtemper, even in its laſt ſtages. We are confident that divers have been mentioned, as being cured of the effects of ſuch bites, who never had one genuine ſymptom of the diſeaſe thence ariſing.

At the ſame time that we ſuggeſt opinions which may tend to deſtroy that happy confidence which has prevented much ſuffering to individuals, and whilſt we own our apprehenſions that none of the celebrated medicines hitherto propoſed to the public can ſafely be confided in, either as prophylacticks or as curatives,

tives, we would earneſtly recommend one means of preſervation, which not only the preſent inſtance before us, but extenſive experience ſeem to eſtabliſh upon a ſolid foundation; that is, after having waſhed the part, and cleanſed the ſurface as quickly as poſſible from the poiſon, to enlarge the wound immediately by actual cautery, the knife, or any other ſpeedy and effectual method; and to promote the diſcharge as long as is poſſible. This being effectually done, affords the ſureſt ground for a proper confidence and ſecurity againſt future miſchief.

Two circumſtances we take the liberty to ſuggeſt, as deſerving ſome attention:

The firſt is, in caſe of a bite from a mad animal, to recollect what part was bit, and if through any, through what kind of covering. A bite through thick garments, or leather, as the teeth of the animal would probably be wiped quite clean from the venom, ought to give leſs uneaſineſs than when it happens to the naked ſkin.

Se-

Second, Not to kill the animals, if it can be avoided, till it is paſt a doubt they were mad. On both theſe circumſtances may depend conſiderable ſatisfaction to the perſon bit; and it may not be improper to add, that there is abundant reaſon to ſuſpect that very few of thoſe who are bit by mad animals are liable to be affected by the *hydrophobia*, or other fatal effects of the bite. This, however, is not intended to abate the care that is due on theſe occaſions, but as a proper antidote to that deſpondency which is often the conſequence of this accident.

In reſpect to our conduct in the preſent caſe, it is ſubmitted to your cenſure. We acknowledge we deſpaired of our patient's recovery. If we kept partly in the track our predeceſſors had recommended, as circumſtances admitted, ſo far we were juſtified: but we went further, we purſued ſuch means as we thought moſt likely to have one of theſe deſirable effects; to keep up the forces of life, by conveying into the habit every

kind

kind of nouriſhment by the paſſages left open, *viz.* the bowels and the ſkin, and thereby enabling Nature to ſupport the conteſt longer; or elſe, to calm and relax, and render the conflict at laſt leſs terrible to the aſſiſtants, and leſs painful to the ſufferer.

We thought ourſelves juſtified, from conſidering the ſtate of the pulſe, and other circumſtances, to take away ſome blood, and repeatedly. That we might not reduce the ſtrength beyond what appeared neceſſary, we choſe to order it to be taken from the Patient ſtanding; becauſe, we were ſatisfied, he could not loſe ſo much blood in that ſituation as would be detrimental without fainting, much ſooner than he would have done in a ſitting or decumbent poſture.

Additional

Additional Directions for the treatment of persons bit by mad animals.

1ſt, Prevent the animal ſuppoſed to be mad from being killed, if poſſible, till it is paſt a doubt that by refuſing ſuſtenance in any form, and other circumſtances, uſually accompanying this ſtate, it is evident the creature is mad. Let all poſſible care, however, be taken, in the mean time, that he be confined in ſuch a manner as to injure no other animal. This attention, though it does not contribute to the cure, it may to the comfort of the patient.

2d, Obſerve whether the wound is made through any covering and of what kind; as much ſatisfaction may be afforded to the patient if the wound was made through thick cloathing or leather.

3d, Remove the ſlavered cloths as ſoon as poſſible, and waſh the wounded or bruiſed parts with water; in which if a little ſalt is diſſolved, it can do no harm.

4th, Conſider in what manner the wounded part may be treated, ſo as to

keep it diſcharging as long as poſſible. If in a fleſhy part, and the patient will ſubmit to it, exciſion of the wounded part is the beſt ſecurity from danger.

Where this operation cannot be admitted, the actual Cautery, the Lunar Cauſtic, a Veſicatory may be applied with advantage, according as the part, the age of the patient, and the ſituation may direct. In every caſe let the wound be kept open as long as it can be done conveniently. A ſmall quantity of gunpowder, a little moiſtened, ſpread upon the part, if only ſcratched by the teeth of the animal, or put into the wound if large enough to receive but a little, and then kindled with a lighted paper, will, perhaps, as ſuddenly, as eaſily, yet ſafely enlarge the wound, as can be effected by any other means, and occaſion ſuch a kind of wound as will not inſtantly be cloſed.

The choice of theſe ſeveral methods muſt be left to the operator. Wounds in the hands, feet, or face will not admit of the injured parts being cut out

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ſo ſafely, as might be done on the muſcular parts of the arms and legs.

The time, likewiſe, of keeping the wounds open muſt in ſome reſpect depend on their ſituation. To keep open a running ſore for a long time on the face and hands would be difficult, and productive of various inconveniencies.

Of all the prophylactics yet offered to the public, experience has proved there is not one to be depended on; it may, perhaps, be worth while to conſider in this place the means of prevention principally in vogue.

When a perſon is bit by a mad animal, the firſt thing uſually thought of is, Sea Bathing. The party is ſent to ſome bathing-place, where there are commonly perſons employed in this buſineſs, who, by keeping the patient long under water, and dipping him repeatedly, reduce him almoſt to a ſtate of ſuffocation. Some of the ſalt water gets into the Trachea; more into the ſtomach, and proves ſometimes a briſk purgative. Here the proceſs ends, and the patient is

deemed to be ſecure from any future accidents on account of the bite.

The reader will have obſerved in the preceding caſe, that the whole of this proceſs is founded on miſtake, and it is certain that divers who have undergone the utmoſt ſeverity of this diſcipline have died of the Hydrophobia.

The Pulvis Antilyſſus of Dr. *Mead* has had no better ſucceſs, and is now almoſt wholly forgot.

No medicine, as a preventative, ſeems to have maintained its credit ſo long as that called the Ormſkirk remedy. It is called ſo from the name of a town in Lancaſhire, near which the gentleman lived in whoſe family the ſecret has been long preſerved, and from thence diſtributed with ſuch apparent ſucceſs, as to be generally deemed infallible for preventing the Canine Madneſs. I am ſorry there are more inſtances to the contrary, than that which is related in the preceding account.

The Tonquin medicine, compoſed of Muſk and Cinnabar, has been equally

unſucceſsful. All theſe different medicines have been employed, by practitioners, and all of them have failed.

Dr. James, who had great credit amongſt ſportſmen, and great opportunities of obſervation, thought Turbith emetics and mercurials certain antidotes; but theſe, likewiſe, have had the ſame fate with others; they have been neglected, not becauſe their promoters were no more, but becauſe they were found to be inſufficient.

His practice, however, and ſome other publications, turned the attention of phyſicians to mercurials, and they have of late been conſidered as the moſt certain antidotes to the Canine Madneſs. We gave them a ſhort, tho' ineffectual trial. Others have been more bold, but not more ſucceſsful. There is too much reaſon to diſtruſt their efficacy in preventing or curing the Hydrophobia.

Notwithſtanding theſe diſcouragements, there is one thing which ought to afford the ſufferers ſome conſola-

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tion; which is, that it appears very evident, that if no means of prevention were uſed, many of thoſe who are bit by mad animals, would never be liable to the fatal conſequences of Canine Madneſs.

On the other hand it is more than probable, from divers accounts, which have been publiſhed, that perſons of timid and anxious diſpoſitions, who have been bit by ſome animal, even without any proof of its being mad, have imagined themſelves affected with every ſymptom of canine madneſs they have heard of, deſcribed their complaints as ſuch, were treated accordingly, and cured of a diſeaſe that had no real exiſtence.

It is, therefore, a matter of no ſmall moment to the practitioner, as well as to the patient, to have all theſe circumſtances in contemplation, and whilſt the former is neglecting no means which either the experience of others, or his own judgment, have induced him to think are conducive to ſecurity, the patient ſhould be confirmed, by every juſt and rea-

reaſonable argument, in an opinion of their efficacy.

After taking this ſhort view of the means recommended to us as preſervatives againſt the fatal effects of this poiſonous bite, and have ſeen too much reaſon to conclude them ineffectual, it is with regret I acknowledge myſelf unacquainted with any method of treating the Hydrophobia more ſucceſsfully, or even of leſſening the diſtreſs with which it is accompanied farther than has been already propoſed.

The firſt ſymptom of the Hydrophobia, which is a dread of all liquids, cuts off in an inſtant a great part of the means of relief by internal means. It is with great difficulty that medicines of any kind, or in any form, after a day or two have elapſed, can be got down.

The caſe which Dr. Watſon and myſelf attended, concluded like all the inſtances of the genuine Hydrophobia on record fatally. Had we the ſame ground to go over again, for my own part, I confeſs I know not of a more reaſonable

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plan. I would not, however, discourage others, from pursuing their own ideas: Some fortunate event may, at length, make us better acquainted with the nature of this poison, and point out a specific remedy.

Should another accident of the like nature occur, until we are directed to a more rational and successful method, I should still be inclined to pursue a plan similar to that which we laid down in our treatment of the case before described. Its basis was, to prevent the loss of strength as much as possible, in order to gain time, and afford the best chance of relieving the patient. In this disease we are early precluded from the usual means of effecting this purpose, as the patient soon finds himself incapable of swallowing any kind of nutriment in a proper quantity, as hath been already mentioned.

Two methods, however, still remain of assisting the patient, though imperfectly. First, by clysters. By this means a large quantity of aliment may be supplied.

plied. Broth, milk, eggs, in various ſhapes, may be exhibited in ſmall quantities, that they may be retained, whilſt larger promote their own rejection.

Secondly, by baths. It is probable that by this method large ſupplies of fluids may be introduced into the habit, by means of the abſorbent veſſels, placed on the ſurface of the body every where.

Whether any uſeful additions can be made to warm water can be determined only by experience. Perhaps broth, moderately ſalted, with the addition of aromatic herbs, might be uſed alternately, with warm water, to which may be added a handful or two of that compoſition ſold by the perfumers under the name of *Pot Pourrie*, and a proportion of Bay Salt, ſufficient to make it nearly equal to ſalt water, or about twelve ounces to every four gallons.

Whatever bath is made choice of, the patient ſhould continue in it as long as it is eaſy to him, and in a degree of heat that he bears with pleaſure, perhaps, from 80 to 86 degrees of Fahrenheit's

Thermometer. The patient may be wiped dry, put into a warm bed, a clyſter given of half a pint of broth, with a raw egg beat up in it; and both this and bathing be moſt induſtriouſly repeated.

From the trials made with opium, it does not appear, that this drug has had any beneficial effects. It is difficult to get it down in any quantity at the time we moſt want it, in any ſhape. By clyſters it may be given, had we any reaſon to conclude it would be beneficial. In regard to its external application I am perſuaded from experiments, that if the ſkin is whole, opium never produces any ſoporific effects.

Applied as a plaiſter, or a cataplaſm, it will produce the ſame effect as any ſimilar plaſtick, ſemireſinous ſubſtance, and no more. In tincture, it will act as ſpirit would act, impregnated with ſuch a kind of ſubſtance, void of all anodyne quality, and in no other way. Half an ounce of opium ſoftened into the form of a pultice and applied to the belly of a

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healthy new-born infant did not produce the leaſt anodyne effect. The like trial has been made with Mithridate, Venice Treacle, and Laudanum, and with the like reſult. In a diſeaſe ſo ſwift in its progreſs, it is of conſequence to know what *will not be efficacious*. It compels us to look around for other auxiliaries.

If mercurials can be of uſe, it would ſeem that the ſteam of Cinnabar would be worth a trial. By this means it would be practicable to impregnate the air in which the patient breathes, ſhould he be incapable of admitting the fume in the uſual mode, into the Fauces, ſo as to produce the effects of Mercury on the parts affected the moſt ſpeedily.

When the patient comes out of the warm bath, the mercurial ointment may be applied liberally. I am afraid it will be found as ineffectual as the other means hitherto made uſe of; but in caſes like this, it is better to try a medicine of whoſe efficacy there may be ſome doubt, than none at all.

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In reſpect to bleeding, I have only one thing to obſerve. If the patient is bled ſtanding, till he ſhews a diſpoſition to faint, it may be done without hazard; it may abate a little of that inflammatory diſpoſition, which is the conſequence of continued irritation.

It would, perhaps, at length contribute to remove this uncertainty, if thoſe who are applied to on theſe intereſting emergencies, would conſider themſelves as obliged by the honour of their profeſſion and the ties of humanity to note with all poſſible preciſion and impartiality every incident in the progreſs of this diſeaſe; and whether they purſue the hints here ſuggeſted, or take up more rational ones from their own ſtore, would communicate the reſult to the public. By this method the field of conjecture would be contracted, and our ſucceſſors directed to new objects of inveſtigation. The reſult would be not leſs honourable to thoſe who engage in the ſearch, than beneficial to mankind in general.

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